

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 8/26/2026 5:23 PM EST

Confirmation Number: 16925

Amended Confirmation Number:

Employer Information

Name: OMS National Insurance Company, RRG
Address: 425 N Martingale Rd Suite 900
City: Schaumburg
State: IL
Zip Code: 60173

Plan Administrator Information

Name: OMS National Insurance Company, RRG
Address: 425 N Martingale Rd Suite 900
City: Schaumburg
State: IL
Zip Code: 60173
Phone: 8476538457
Email: aike.zavala@omsnic.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	OMS National Insurance Company Phantom Stock Plan	Number of Employees: 13
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Additional Information:

Already on file as of 3/10/2023 is the OMS National Insurance Company Plan
Number of employees = 15



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 16925. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.